

SOCIALIZATION SKILLS TRAINING

SERVICE DESCRIPTION

Socialization Skills Training focuses on improving clients' ability to recognize and self manage problematic social behaviors that interfere with successful community participation. This service shall include didactic instruction and actual practice of appropriate social skills for community settings. The community environment shall be used extensively to teach and practice individual interpersonal skills necessary to participate successfully in community activities. Family members and key significant others shall be included in this training in order to promote carryover and to provide for sustainability through natural supports.

The Provider shall incorporate peer/professional feedback to evaluate the client's progress toward self-management, and to promote carryover of appropriate social behaviors into community settings consistent with the client's long-term goals as identified by the planning team.

Clients shall be encouraged to express unique personal interests and lifestyles.

Transportation to Socialization Skills Training instruction offered at a facility may be approved under the following circumstances:

- The client has no other means of transportation to attend Socialization Skills Training conducted in the facility. Transportation to community activities must be planned utilizing community transportation that will be accessible to the client after completion of programming; and
- Transportation must be requested on a separate Prior Authorization Form. A separate approval will be issued for related transportation.

This service cannot be billed for clients receiving similar services as a component of another Department of Health and Senior Services (DHSS) or MO HealthNet program.

SERVICE LIMITATIONS:

This service:

- **Is limited to a maximum of 26 half-day sessions per lifetime.** The initial treatment plan shall contain recommendations regarding the schedule of training sessions; and
- Cannot be billed for clients currently receiving socialization skills training as a component of another service the client receives through the Adult Head Injury (AHI) Program or other state agency.

PROVIDER REQUIREMENTS:

Socialization Skills Training Providers must:

- Have a DHSS Participation Agreement for Professional and Special Services Provider form and Provider Application for the provision of Socialization Skills Training services;
- Have a developed curriculum to address typical socialization problems encountered by individuals with Traumatic Brain Injury (TBI) that includes provisions for community practice and self evaluation; and

- Be part of an organized and established agency that provides specialized services to individuals with head injuries and/or persons with disabilities.
- Provider staff serving in the supervisor role: Must be a Qualified Head Injury Professional (QHIP) with a bachelor's degree in Recreational or Occupational Therapy, Psychology, Education, Special Education, or Social Work;
- May supervise up to 12 direct care staff;
- Must have a primary role in didactic instruction activities;
- Must be responsible for development of individualized treatment goals. Activities in the community may be carried out by a direct care staff worker that meets qualifications listed below; and
- Must ensure that the direct care staff worker is trained in intervention methods that assist individual participants in socialization skill acquisition.

Provider staff performing direct care:

- Must have a high school diploma or equivalent;
- Must have completed training in the Primary Skills from the Direct Care Worker Competency List within six months of employment. The Primary Skills would include the following six domains:
 1. General Overview;
 2. Working with the Consumer in his/her Environment;
 3. Professional Role and Job Skills of the Direct Care Worker;
 4. Learning About Community Resources;
 5. Safety and Welfare of the Consumer; and
 6. Policies of the Direct Care Worker's Organizational System.
- Must complete a minimum of five hours per year of continuing education specifically related to job duties after the first year of employment.

UNIT OF SERVICE	REIMBURSEMENT RATE
One three-hour half-day	\$69.00

SERVICE PRODUCT:

An individualized written intervention plan shall be developed that describes:

- Specific barriers in socialization skills identified by the planning team that prevent the client from social participation in the community;
- What specific socialization skills will be taught and practiced;

- What strategies will be used to address barriers in socialization skills identified by the planning team;
- What environment will be used for individualized practice of socialization skills;
- What mechanism will be used for professional and peer feedback to client/family;
- Frequency and duration of intervention expected to achieve competency in acquisition of self management skills; and
- Expected maximum level of achievement.
- A monthly progress report to the AHI Service Coordinator indicating:
 - What barriers continue to exist for the client in managing interpersonal skills/socialization with peer groups;
 - What progress was made on those barriers during the reporting month;
 - What education/practice was provided for the family/significant other(s) during the month, including their response;
 - What techniques/strategies have been effective;
 - What priorities will be addressed in the coming month;
 - Expected duration of intervention needed, and
 - Expected outcome.

NOTE: Refer to Treatment Plan and Progress Report.

DOCUMENTATION REQUIREMENTS:

Providers must retain for three years, from the date of service, fiscal and treatment records that coincide with and fully document services billed to DHSS, and must furnish or make the records available for inspection or audit by DHSS or its representative upon request. Failure to furnish, reveal, and retain adequate documentation for services billed to DHSS may result in recovery of the payments for those services not adequately documented and may result in sanctions to the Provider's participation in DHSS programs. This policy continues to apply in the event of the Provider's discontinuance as an actively participating DHSS Provider through change of ownership or any other circumstance.

REFERRAL INDICATORS:

The typical participant referred for this service meets the following:

- Client has specific interpersonal behaviors identified by the planning team that currently interfere with active participation in community activities;
- Client/family has expressed interest in improving interpersonal skills to improve socialization opportunities with peers; and
- Client has the ability to learn and modify inappropriate social behaviors given strategies to do so.

DESIRED OUTCOMES:

- Client demonstrates a sustainable improvement in self management of inappropriate social behaviors;
- Client's family/key significant others demonstrate knowledge of methods and techniques to support the client's appropriate social interactions in a variety of community settings; and
- Client and family report an increase in successful community participation.